# FOR MYSORE STATE

-11-53.

HEALTH, EDUCATION AND LOCAL ADMINISTRATION

(195 5 ) Department.

MS. SERIES.

G.O. No. MS.3117, Health.

60

Closed
MS
Sindt

Dated 4th October, 1955.

---

[Despatch Abstract.]

Epidemic - South Kanara District - Coondapur taluk - Contageous eye disease from January to June 1955 - Papers recorded -

INVEST WISELY
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# INDIAN POSTS AND TELEGRAPHS DEPARTMENT

192

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To LOCAL ADMN. DEPT.

By

ASSISTANT SECRETARY TO GOVERNMENT
HEALTH, EDUCATION & LOCAL ADMN. DEPT.
MAY 1955
MADRAS
5 MAY 55

| Handed in at (Office of Origin). | Date | Hour | Minute | Service Instructions. | Words |
|---|---|---|---|---|---|
| | | | | | |

Recd here at H. M.

TO

0 1 COONDAPOOR 4 RDF MSO 36

SECRETARY HEALTH DEPARTMENT GOVT MADRAS F

VIRULENT TYPE CONTAGEOUS EYE DISEASE RAGING EPIDEMIC FORM BARKUR

COONDAPOOR ETC PLACES IMMEDIATE MEDICAL AND CONTROLLING MEASURES NECESSARY

MANY PEOPLES LOST EYESIGHT PRAY URGENT ACTION=KOLKEBAIL M L A

Indents, P.T.O. Books—dated 10-9-54, 1 Lakh Books.

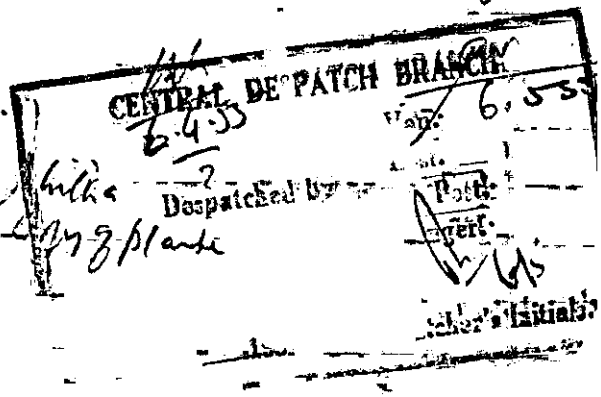
SM.

Encl. 44129/43/55-1 dated 6-5-55.

Forwarded to the D.P.H./D.M.S.
for necessary action and Report.

H4
SR
6.5.55

To the D.P.H.
D.M.S.



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H-ELA

H 23

# INDIAN POSTS AND TELEGRAPHS DEPARTMENT

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Cb

MAY 1955

4488

CHIEF MINISTER

H 5 MAY 1955

MADRAS

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5.55

} Code

from mn118/1

To

By

| Handed in at (Office of Origin) | Date | Hour | Minute | Service Instructions. | Words |
|---|---|---|---|---|---|
| Coondapoor | 4 | 11 | - | | 35 |

Recd here at 06-11-25 M

Chief minister Govt mds rgm =

Incident type Contageous eye Disease
raging epidemic form Bukur Coondapoor
etc Places immediate medical and
Controlling measures necessary many Kolle
Lost Eyesight Pray urgent action
Kolhebail -

4

H·E·L·A (H3)

Telegram ~~dt~~ m/P 3 ~~dt~~ is only a copy ~~addressed~~ addressee to C.M. Action has already been taken ~~on~~ on the Tgm. m/l addressed to this Dept — Pl. see page 2 ante. The report from D.P.H & D.M.S may be awaited till 20.5.55

p 2 ante

RS 7/5/55

AV 7.555

NK 7.5.55

TS 7.5.55

S. S. Kolkebail, B. Sc., LL. B., M. L. A.,
Secretary:
PRAJA SOCIALIST LEGISLATURE PARTY

MEMBER · MADRAS · LEGISLATIVE · ASSEMBLY

MINISTER FOR HEALTH 7 MAY 1955 GOVERNMENT OF MADRAS

H3

Camp COONDAPOOR

Date 5-5-'55.

Spl. G.S. H.E.+L.A.
Please ask the D.M.S.+
D.P.H. to take urgent action
Special D.O. Put up DOS
Rem 12 7.5.55 7/5/55

JOINT SECRETARY TO GOVERNMENT 7 MAY 1955 HEALTH, EDUCATION AND LOCAL ADMN. DEPT.

Sri Honourable A.B. Shetty,
The Minister for Health,
Government of Madras,
MADRAS.

Sir,

Ref: Wire dated 4--5--1955.

Sub: Contagious eye--Disease in Barkur and Coondapoor--Virulent form.

---

I have sent a wire to-day as follows:-

"Health Minister, Government of Madras. Virulent type contagious eye disease. Raging Epidemic form Barkur, Coondapoor, etc. places. Immediate Medical and controlling measures necessary. Many people lost eye sight. Pray urgent action. Kolkebail, M.L.A."

I wish to state further that the eye disease is spreading in a contagious form and some of the poor Villagers have even lost their eyes. The disease has not been properly diagonised by the Doctors and the disease is spreading unchecked. This is said to be spread by a variety of small flies which exist in abundance in this year. People in villages are not getting proper aid to cure the disease. It is not known how these flies could be checked from being spread.

I earnestly request that an immediate medical aid such as Mobile Eye Clinics may be sent to South

P. T. O.

Kanara District so that the poor Villagers may not lose their eyes and become a burden to the Nation.

Thanking you, Sir,

Yours faithfully,

H·E·L·A (H3)

Special

D.O.No. 44129 H3/55-2 dt. 9-5-'55

My dear Sangham Lal, / Adisubramaniam,

Sub: Epidemics — South Kanara Dist — Barkur, Coondapoor etc. — Contagious eye disease — Prevalence of —

Ref: Govt. Endt. No. 44129 H3/55-1 dated 6-5-'55

p 2 cf

I am to invite your attention to the Govt. endt. ~~referred to above~~ cited and to forward in continuation, a copy of the letter dated 5-5-'55 from Sri S. S. Kolkebail, M.L.A. addressed to the Minister for Health and to request you to take urgent action in the matter and send your report to Govt. as early as possible.

p 2 cf

p 5 cf

Yours sincerely,

Y. S.

Lt. Col. Sangham Lal, M.B.B.S. F.R.C.S., D.O.M.S. (Lond)
Director of Medical Services

9.5.55

9.5.55

JS

9.5.53

with a copy of pages 5-6 cf

Dr. T. S. Adisubramaniam, D.I.H. (Eng)
Director of Public Health

Spl. G.C., H.B.&.Z.A.
Immediate relief measures should be taken
AB 374 assessed 8/5

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# INDIAN POSTS AND TELEGRAPHS DEPARTMENT

SERVICE BEFORE SELF
JOINT SECRETARY TO GOVERNMENT
46058
19 MAY 1955
MINISTER FOR HEALTH
9-MAY 1955
HEALTH EDUCATION AND LOCAL ADMN. DEPT.
GOVERNMENT OF MADRAS
Office Stamp.
555

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Sent at — H. — M.

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| Handed in at (Office of Origin) | Date | Hour | Minute | Service Instructions. | Words |
|---|---|---|---|---|---|
| COONDAPOOR | 4 | 9 | - | | |

TO HEALTH MINISTER GOVT MADRAS
MT RD

Recd here at H. M.

-- VIRULENT TYPE CONTAGEOUS EYE DISEASE RAGING EPIDEMIC FORM
KARKUR COONDAPOOR ETC PLACES IMMEDIATE MEDICAL AND CONTROLLING
MEASURES NECESSARY MANY PEOPLES LOST EYESIGHT PRAY URGENT ACTION
- KOLKEBAIL M L A --

Ravi Printers, Madras-1, PTG/C. Books—Jntad. 10-9-54; 1 Lakh Books.

Jt: Secy. H.E.Th.A
sanctioned
12/5

BUY NATIONAL SAVINGS CERTIFICATES

# INDIAN POSTS AND TELEGRAPHS DEPARTMENT

JOINT SECRETARY TO GOVERNMENT
47018
12 MAY 1966
HEALTH, EDUCATION AND CO-OPERATION DEPT.

Class
Prefix } .....Code.....

259 No.

Office Stamp
MADRAS BOARD, D.T.S.

Recd. from _____

By _____

Sent at _____ H. _____ M.

To _____

By _____

| *Handed in at (Office of Origin)* | *Date.* | *Hour.* | *Minute.* | *Service Instructions.* | *Words.* |
|---|---|---|---|---|---|
| | | | | | |

**TO**

*Recd. here at* *H.* *M.*

0 PA GANGULI 11 22 HEALTH MINISTER GOVERNMENT OF MADRAS MADRAS (

PECULIAR CONTAGIOUS EYE DISEASE SPREADING AFFECTED CHILDREN

PARTICULARLY PRAY TAKE ACTION = PRESIDENT PANCHAYAT GANGULI =

N. B.—The name of the Sender, if telegraphed, should be written after, but separated from the text.

(Copy for Tamil
Nadu Govt.

H·E·L·A(H3)

Endt. 44129·H3/55-3 d/ 13-5-55.

Communicated to the D.P.H/D.M.S

in continuation of this Dept. D.O. No.
44129 H3/55-2 d/9-5-55. ~~a for urgent~~ Ed
~~action and report~~

RJ
13/5/55

AV
13.5.55

13.5.55

p n cante

To the D.P.H / D.M.S with a copy of n/l ante.

Dealt
VB
13/5/55

SPECIAL:
D.O.Ref:No.39634-G/55.

Office of the Director of Medical Services, Madras 6 dated 12-5-55.

H3

My dear Sri Ghulam Mahmood,

Sub:-Epidemic--South Kanara District--Barkur, Coondapoor etc. Contageous eye disease--Prevalence of.

--

Please refer to your D.O.No.44129 H.3/55-2 dated 9-5-55. The District Medical Officer, South Kanara has already been requested to take immediate steps for the prevention and control of the eye disease which is prevalent in Barkur and Coondapoor villages in consultation with the District Health Officer, South Kanara. He has also been asked to submit a detailed report in the matter and I shall forward a copy of his report immediately on receipt.

Yours sincerely,

ASSISTANT SECRETARY TO GOVERNMENT
47051
18 MAY 1955
HEALTH, EDUCATION & LOCAL ADMN. DEPT.

To

Sri K.Ghulam Mahmood, I.A.S.,
Joint Secretary to Government,
Health, Education and Local Administration Department,
Fort St. George, Madras-9.

15

D.O.No.32058-1-H3/55 dated 11-5-55.

Office of the Director of Public Health, Madras.6

Please circulate
6 M(H) 9/13/5

Dear Sri Ghulam Mahmood.

Sub: Epidemics -South Kanara District Barkur, Coondapoor etc. - contagious eye disease - prevalence of.

Ref: Your D.O.No.44129-H3/55-2 dated 9-5-55.

---

Dr. P.V. George, Nutrition Health Officer of this department is being deputed to survey and study the prevalence of the eye disease reported in South Kanara District. On receipt of his report, necessary preventive measures will be undertaken and a report sent to Government.

Yours sincerely

(T.S. ADISUBRAMANIAM)

To

Sri K. Ghulam Mahmood,
Joint Secretary,
Health Education and Local Administration Department
Fort St.George,
MADRAS.

SN.12.5

Medical Department.

From

Lt. Col. Sangham Lal, MBBS., FRCS., DOMS(Lond).,
Director of Medical Services, Madras 6.

To

The Secrerary to Government, Health, Education and
Local Administration Department, Madras .

Ref.No.39634-G/55 dated 17--5--55.

Sir,

Sub:- Epidemic- South Kanara District- Barkur, Coondapur etc - Contageous Eye Disease- Prevalence of.

Ref:- My D.O.letter Ref.No.39634-G/55 dated 12-5-55 to the Joint Secretary to Government, Health, Education and Local Administration Department, Madras.

Government Endorsement No.44129-H2/55-2 Health dated 13-5-55.

---

ASSISTANT SECRETARY TO GOVERNMENT
18 MAY 1955
HEALTH, EDUCATION & LOCAL ADMN. DEPT.

In continuation of my D.O.cited I enclose for the information of Government a copy of the report dated 11--5--55 together with its enclosure received from the District Medical Officer, South Kanara. In the circumstances stated by the District Medical Officer in his above letter I recommend that sanction maybe accorded for printing 5,000 copies of the pamphlet (enclosed )for distribution to the public in South Kanara District. In this connection I forward herewith a further report dated 13-5-55 received from the District Medical Officer, South Kanara. — p20 intr

Yours faithfully,

for Director of Medical Services.

Prv.17.5.

Copy to the Director of Public Health, Madras (with enclosures) for information.

--

Copy of letter dated 11--5--55 from the District Medical Officer, South Kanara, Mangalore addressed to the Director of Medical Services Madras.

--

Sub:- Eye disease- Virulent type of contagious eye disease in epidemic form in Barkur and Coondapoor.

Ref:- Your telegram dated 7-5-55 and Memo Ref.No.39634-1G/55 dated 6-5-55.

--

Myself and the District Health Officer (who was away on camp) proceeded to Barkur on 9-5-55 and reached the place in the night. After investigation of the cases next morning we proceeded to Coondapoor and investigated into the cause of the disease. Our findings are as follows:-

Catarrhal conjunctivitis due to Kock Weeks bacillus and Axon maurenfeldt organism is common during the premonsoon period due to the sale of jack fruits, mangoes etc. The vector being a small fly "mangoe flies" and the ordinary fly. In addition ~~the~~ the spread of the disease is caused by contaminated clothes, direct contact dust, and bad hygenic conditions. I give below the comparative figures for the months of January to May 1954 and 1955 as regard the cases reported from Barkur.

| | 1954. | 1955. |
|---|---|---|
| January. | 31 | 31 |
| February | 26 | 39 |
| March. | 21 | 35 |
| April. | 4 | 79 |
| May (10-5-55) | 20 | 40 upto date. |

The cases are being treated with boric and weak mag/sulph lotion for washing the eye. Argyrol 10% solution and Z.B.drops are being used. All the cases have been cured. There was no case of blindness. I held a conference with the potails of Kochur, Hemdi and the President Panchayat Board of Barkur. I have distributed tubes of Auromycin eye ointment for treatment in resistant cases. The conclusion arrived is that the conjunctivitis is common during the season but in Barkur area it is double during this year. The treatment given is effective and no cases of conjunctivitis have gone into blindness. As a preventive measure they were requested to tom tom in the villages to advise the patients to report to the hospitals immediately for treatment. The sanitary staff were directed to clean the fly breeding areas and also to do propaganda.

Coondapoor. The incident are far more than in last year. The majority of the cases are of the Kock's weeks's and Axon Maurenfeldt and some to pneumococci and are easily amenable to treatment. The cases are washed with saline and with 1% silver nitrate drops followed by Argyrol solution. The pneumoccal variety is treated with penicillin ointment. The angular conjunctivitis are treated with Z.B.drops. Aureomycin were tried in intractable cases and responded well.

--

During the same period 2 cases of ulcer cornea was noted and both were treated successfully and no other complications were seen. No cases of blindness were seen or produced. All the cases were treated successfully. I had a test survey in the slum area. I had taken smeares of those who were actually suffering.

Inspected 21 houses which contained 114 inmates. There were 34 cases of which 30 were cured and 4 are active at present. So the percentage suffering is about 3.5% of active cases. A copy of notice for tom tom is sent herewith and also an English translation of 5000 copies of pamphlets to be printed and distributed in the whole district is also enclosed.

I am of opinion that the incidence of the disease is much less now and is under control. The resistant cases are due to some of the patients taking recourse to the application of oils and decoctions into the eyes. In one case an educated and well to do man in his anxiety to get the disease cured quickly had applied in quick succession Z.B. drops Aureomycin, penicillin,

(p.t.o)

Argyrol etc which produced severe irritant conjunctivitis with chemosis while his children who had only Z.B.drops and penicillin ointment were cured.

I have met Sri Kolkebail M.L.A., the Vice President of ie Panchayat Board, Sri Manjaya Shetty, M.L.A., and District ard member and Sri Venkatramanaya a medical practitioner and nad a discussion with them with regard to eradication of the disease and advised them to address a public meeting with the idea of bringing to the notice of the people how to prevent the disease and to get cured.

Government Hospital, Coondapoor: Statement of conjunctivitis.

| | 1954 | 1955. |
|---|---|---|
| January. | 15 | 180 |
| February. | 12 | 218 |
| March | 21 | 315 |
| April. | 23 | 784 |

---

Conjunctivitis which is prevalent in Coondapoor, Barkur Basrur Korga etc. is a disease which affects the eyes and is an easily amenable disease. This can be cured by any doctor with easily available drugs and does not produce complications if properly handled. The source of infection is the organism carried by files clothes, direct contact etc. Those that are affected are advised to get themselves treated at the nearest hospital or dispensary or by any allopathic doctor.

You can prevent the spread of the disease by washing your eyes twice or thrice a day with clean water, avoiding flies contaminated clothes and rubbing of the eyes with fingers and prompt treatment at the nearest medical institution.

As cases of conjunctivitis are prevelant in the panchayat area and surrounding villages, I request that people may be advised by way of tom tom to take treatment at the Government Hospital, Coondapoor. The cases can be easily treated and cured. The breeding of flies which are the causes of spreading the contagion should be prevented. A greater attention to sanitation by way of prompt collection and disposal of rubbish and decomposed fruits etc from the streets and private premises should be taken.

---

Copy of letter dated 13-5-55 from the District Medical Officer, South Kanara, Mangalore.

--

Sub:- Conjunctivitis at Barkur and Coondapoor.
Ref:-Your telegram dated 7-5-55 and Memo Ref.No. 9634-1G/55 dated 6-5-55 and my reply thereon dated 11-5-55.

--

The slides of smeares taken at Barkur showed only pus cells and no organisms. While those taken at Coondapoor showed either Kock's week's bacilli or ? diplobacillus of morax (Moraxcella Lacunata). This was seen by the Bacteriologist of the Kasturba Medical College, Mangalore.

--(true copy)--

for Director of Medical Services.

Subject matter same as P5 Cf. 61

V. S. Kolkebail, B.Sc., LL.B., M.L.A.,
Secretary:
PRAJA SOCIALIST LEGISLATURE PARTY

MEMBER · MADRAS LEGISLATIVE ASSEMBLY · सत्यमेव जयते

Camp Coondapoor.

Date 5-5-'55.

Ltr. acknowledged.

HELA

D.O. No. 17 12/5

To

Sri Honourable K. Kamaraja Nadar,
Chief Minister,
Government of Madras,
M A D R A S.

PS to C.M.

JOINT SECRETARY TO GOVERNMENT HEALTH, EDUCATION AND LOCAL ADMIN. DEPT. Sif. 4902 FB MAY 1955

Ref: Wire dated 4--5--1955.

Sub: Contagious eye--Disease in Barkur and Coondapoor--Virulent form.

---

I have sent a wire to-day as follows:-

"Chief Minister, Government of Madras. Virulent type contagious eye disease. Raging Epidemic form Barkur, Coondapoor, etc. places. Immediate Medical and controlling measures necessary. Many people lost eye sight. Pray urgent action. Kolkebail, M.L.A."

I wish to state further that the eye disease is spreading in a contagious form and some of the poor Villagers have even lost their eyes. The disease has not been properly diagonised by the Doctors and the disease is spreading unchecked. This is said to be spread by a variety of small flies which exist in abundance in this year. People in villages are not getting proper aid to cure the disease. It is not known how these flies could be checked from being spread.

I earnestly request that an immediate medical aid such as Mobile Eye Clinics may be sent to South

P. T. O.

Kanara District so that the poor Villagers may not lose their eyes and become a burden to the Nation.

Thanking you, Sir;

Yours faithfully,

M·E·L·M (173)

Epidemics — South Kanara Dist Bantwal, Coondapur etc — Contagious eye disease — Prevalence of.

From D. M. S. Rep. No. 39634-A/55 dt 17-5-55

Memo No. 44129 M3/55-4 d/ 19-5-55

The D.M.S. is informed that the pamphlet reported to have been sent with his reference cited has not been received in this office. He is requested to send a copy of the pamphlet and also state the approximate cost of printing 5000 copies of the pamphlet.

19/5/55

19.5.55

19-5-55

D. M. S.

CENTRAL DESPATCH BRANCH

2 Initials.

24

H.E/4.A(H3)

Epidemics — S. Kanara Dist — Barkur Coondapur etc — Contageous eye disease — Prevalence of

Ref: From D.M.S. No 39634-G/55 dated 17-5-55

P 17C

Govt. Memo No. 44129 H3/55-4 dated 19-5-55

overleaf

Memo No 44129 H3/55-5 d/ 7-6-55

The attention of the D.M.S is invited to the Govt. Memo cited and he is requested to send his reply at a very early date

over.

To

The D.M.S.

26.5.55

6/6/55

av 7655

7655

MEDICAL DEPARTMENT.

From

Lt.Col.Sangham Lal, MBBS. FRCS. DOMS. (Lond.),
Director of Medical Services, Madras 6.

To

The Secretary to Government, Health, Education
and Local Administration Department, Madras.

Ref:No.39634-G/55 dated 8-6-55.

Sub:-EPIDEMIC South Kanara District--Barkur, Coondapur etc--
Contagious eye disease--Prevalence of.

Ref:-Government Memo.No.44129 H-3/55-4 Health dated 19-5-55.

With reference to the Government Memo. cited I forward herewith a copy of the pamphlet for printing and distribution to the public. Further I have to state that there will be no extra expenditure to Government in printing 5,000 copies of the Pamphlet as the expenditure will be met by the District Health Officer from his office contingencies. In this connection I enclose for the information of Government a *copy of letter C.No.7601/55 dated 1-6-55 received from the District Medical Officer, South Kanara, Mangalore.

Yours faithfully,

For Director of Medical Services.

chr/8.6.

*Copy of letter

Your presumption that only the phamphlets will be printed is correct. In this connection I have to inform you that the expenditure wil be met by the District Health Officer out of his contingencies.

p.t.o.

f his contingencies.

/True copy/

For Director of Medical Services.

PAMPHLET.

Conjunctivitis which is prevalent in Coondapoor, Barkur, Basrur, Korgi etc. is a disease which affects the eyes and is an easily amenable disease. This can be cured by any doctor with easily available drugs and does not produce complications if properly handled. The source of infection is the organism carried by flies, clothes, direct contact etc. Those that are affected are advised to get themselves treated at the nearest hospital or dispensary or by any allopathic doctor.

You can prevent the spread of the disease by washing your eyes twice or thrice a day with clean water, avoiding flies contaminated clothes and rubbing of the eyes with fingers and prompt treatment at the nearest medical institution.

(True copy)

for Director of Medical Service

Draft 1

C.B./o

Special

P7Cf

P15Cf

P15Cf.

To

The D.P.H.

Epidemic — South Kanara Dist — Contageous eye disease — Preventive measures

Ref: Govt D.O. 44129 H3/55-2 d/ 9-5-55
From D.P.H. D.O. ~~39624-6/55~~ 32058-1-H5
d/ 11-5-55.
Mems. No. 44129 H3/55-6 d/ 16-6-55

The D.P.H is requested to ~~send~~ explain his report ~~promised in his reference cited, urgently~~ with the matter.

13/6/55

14/6/55

14.6.55

Dy. Director
16.6.55

P.T.O.

30

Draft II

Epidemic — South Kanara Dist — Specia-

Contageous eye disease

Preventive measures

Ref: Govt. D.O. No. 44129 H3/55-2 d/ 9-5-55 — p 7 cf

From D.M.S. No. 39634-G/55 d/ 12-5-55 — p 13 cf

From D.M.S. No. 39634-G/55 d/ 17-5-55 — p 17 cf.

Memo No. 44129 H3/55-7 d/ 16-6-'55

The D.M.S is informed that ~~requested to state whether~~ in the circumstances stated by him ~~specific orders of Govt are necessary for the printing~~ of 5000 copies of the pamphlet p 27 cf sent with his lr. last cited ~~may be printed and published~~ and published to the public. ~~The chapter in the~~ Kannada ~~version~~ language/Translation in English.

2/ The D.M.S is ~~also~~ requested to send his detailed final report on the ~~Guidance~~ prevalence of the eye disease in the S. Kanara Dist.

To

The D.M.S.

Copy in D.P.H. Circular

14/6/55 — 14.6.55 — 14.6.55 — 14/6/55 — 16.6.55 — Despatched

pp 25-27

112 31

From
Dr.T.S. Adisubramaniam,D.I.H(ENG)
Director of Public Health,
MADRAS 6.

To
The Secretary to Government,
Health, Education and Local
Administration Department,
FORT.ST.GEORGE, MADRAS

R.No. 32058/4/H5/55 Dated 23-6-1955

Sir,

ASSISTANT SECRETARY TO GOVERNMENT
25 JUN 1955
61903
HEALTH, EDUCATION & LOCAL ADMN. DEPTT.

Sub:- Epidemics - South Kanara District - Bakur, Coondapoor etc - Contagious eye disease - Treatment with Ophthalmic ointment.

Ref:- Government Endorsement No. 44129-H3-55-1 dated 6-5-1955.

---

Towards treatment of cases of eye diseases in certain parts in South Kanara District, thirty tubes of Terramycin Ophthalmic Ointment costing Rs. 38-5-3, have been purchased. This expenditure has been incurred in anticipation of approval by Government, from the provision of Rs. 500/- sanctioned in G.O.Ms. Ms. 839, Health, dated 28-5-1955 towards purchase of Ophthalmic Ointment for treatment of cases of eye diseases in Blathur Village in North Malabar District. The above action may kindly be approve Permission may also kindly be accorded to incur expenditure from the above allotment of Rs. 500/- towards purchase of addition al requirement, if any, of Ophthalmic ointment for treatment in South Kanara District. Government will be addressed for providing additional funds, if required, for expenditure in this regard.

Yours faithfully,

C. V. Varghese

FOR DIRECTOR OF PUBLIC HEALTH,
MADRAS

sm.24/6

24/6/55

H.E.L.A(H)

Epidemic — South Kanara Dist —
Contageous eye disease —
Purchase of ophthalmic ointment
Ref.

P3 of (A) G.O.Ms. No. 1839 Health d/28-5-55
From D.P.H. R.No. 32058/4/H3/55
P31 of dated 23-6-55.

Memo No 44129 H3/55-9 d/ 6-7-55

P31 of The Govt. approve the action of the D.P.H in having incurred an expenditure of Rs 38-5-3 (Rupee Thirty eight, annas five and pie Three only) towards the cost of 30 tubes of Terramycin Ophthalmic ointment purchased for the treatment of eye diseases in certain parts in S. Kanara Dist., from the provision of Rs 500/- sanction in G.O.Ms. No. 1839 Health
P3 of (A) dated 28-5-55.

The D.P.H is also permitted to incur further expenditure, if necessary, for the purchase of additional ophthalmic ointment for Treatment of eye diseases

in the S. Kanara Dist. from
the ~~same~~ provision made
in the G.O. referred to above.

To

The D.P.H.
The D.C. Thro Fin.
Copy to the D.M.S.
2 S/cs.

RS
30/6/55.

AV
1.7.55

6.7.55

RS
DPH
6.7.55

H.F.L.A (H3)
35

2/8

1:2 cy

p 7 cf

Epidemic — South Kanara Dist —
contagious eye disease —
Final report called for.

Ref. Govt Endt. No. 44129 H3/55-1 d/ 6-5-55

Govt. D.O. No. 44129 H3/55 2 d/ 9-5-55

Memo No 44129 H3/55-10 d/ 16-7-55

The D.P.H / D.M.S is requested to expedite the submission of his final report on the ~~epidemic~~ eye disease in the South Kanara Dist.

The D.P.H ✓
The D.M.S

Prasad 16.7.55

RS 15/7/55

AV 16/7/55

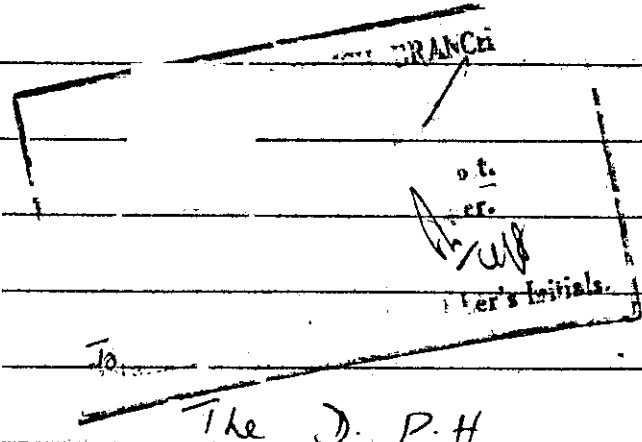
AV 15.7.55

H.E.L.A.(H3)

37

2/4

P 35 f




To

The D. P. H

The D.M.S.

Epidemic — S. Kanara Dist. —
Contagious eye disease —
Final report called for.
Ref: Govt. Memo No: 44129 H3/55-10.
dated 16-7-55
Memo No 44129 H3/55-11 dd/ 3-8-55
The D. P. H / D. M. S is requested to send his final report in the matter very urgently.

RS
2/8/55

AV
3855

AV
2.8.55

From

Medical Department

39

Lt.Col.Sangham Lal, MBBS., FRCS., DOMS.,
Director of Medical Services, Madras-6.

To

The Secretary to Government, Health, Education and
Local Administration Department, M a d r a s.

113

Sir,

In.P.No.204 G/55. Dated 9th August, 1955.

Sub: Epidemic - South Kanara District - Contageous Eye Disease
Finall report - submission of.

Ref: Government Memo No.44129 H.3/55-10 Health dated 16-7-55
and 3-8-1955.

-- P 37 ant

P 35 an

With reference to the Government Memoranda cited, I have to stat
that the matter is under reference to the District Medical Officer, South
Kanara. He has been reminded in the matter and I shall send my final re-
port immediately on receipt from the District Medical Officer.

H.E.L.A.(H3)

Subd for perusal. The final report of the D.P.H and the D.M.S may be awaited till 1-9-55

12/8/55

ASE 13.8.55

13885

Yours faithfully,

for Director of Medical Services.

9/8

ASSISTANT SECRETARY TO GOVERNMENT
11 AUG 1955
795-59
HEALTH, EDUCATION & LOCAL ADMIN. DEPT.

ASSISTANT SECRETARY TO GOVERNMENT
8 SEP 1955
HEALTH, EDUCATION & LOCAL ADMIN. DEPT.

Medical Department.

41

From

Lt.Col.Sangham Lal, MBBS., FRCS., DOMS(Lond).,
Director of Medical Services Madras 6.

To

The Secretary to Government, Health, Education and
Local Administration Department, Madras.

In P.No.204-G/55 dated 2--9--55.

Sir,

Sub.Epidemic -South Kanara District- Contageous eye disease-
preventive measures -final report-submission of-
Ref:- Government Memo No.44129-H.III/55-7 Health dated 16-6-55. — p30 ante
This office letter In P.No.204-G/55 dated 9-8-55. — p39 ante

87865

--

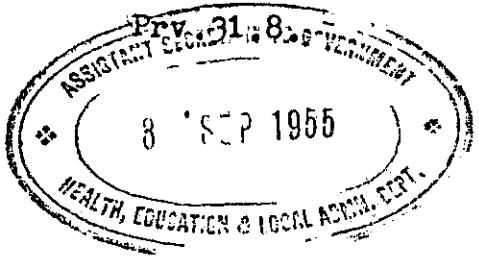
With reference to para (2) of the Government memo cited I enclose for the information of Government a copy of report No. 11857-55 dated 23-8-1955 together with its enclosures in regard to the prevalence of the eye disease in the South Kanara district received from the District Medical Officer, South Kanara . It may be seen from the report that the eye disease is now under control.

43 infra

Yours faithfully,

for Director of Medical Services.

ITS 119



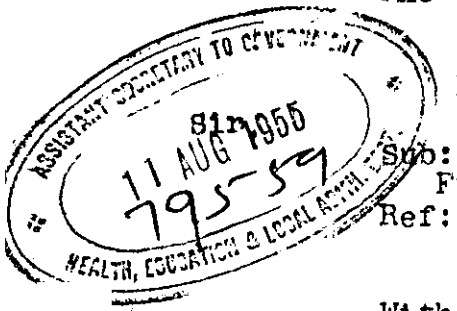
Medical Department 34

From

Lt.Col.Sangham Lal, MBBS., FRCS., DOMS.,
Director of Medical Services, Madras-6.

To

The Secretary to Government, Health, Education and
Local Administration Department, M a d r a s.




In.P.No.204 G/55. Dated 9th August, 1955.

Sub: Epidemic - South Kanara District - Contageous Eye Disease
Finall report - submission of.
Ref: Government Memo No.44129 H.3/55-10 Health dated 16-7-55
and 3-8-1955.

-- P 37 ants

With reference to the Government Memoranda cited, I have to state that the matter is under reference to the District Medical Officer, South Kanara. He has been reminded in the matter and I shall send my final report immediately on receipt from the District Medical Officer.

H.E.L.A.(H3)

Yours faithfully,

for Director of Medical Services.

Subd for perusal. The final report of the D.P.H and the D.M.S may be awaited till 1-9-55

12/8/55
ASE/13.8.55

13885

TV6
9/8

Copy of letter No.11857-55 dated 23-8-155 from the District Medical Officer, South Kanara, Mangalore addressed to the Director of Medical Services, Madras

--

Sub:- Epedemic -South Kanara District- Contagious eye disease final report -submitted.
Ref:- Your Memb In P.No.204-G/55 dated 1-8-1955.

--

The seasonal incidence-of conjunctivitis that usually occur in the months of January to July every year had been on the increase this year particularly more in the months of April, May and June. But the disease now is under control as judged from the outpatient figures.

Sample survey of slum area of Coondapur was undertaken by the District Medical Officer, District Health Officer and the Medical Officer. A copy of the report received from the Medical Officer Coondapur and Barkur are enclosed herewith. — below

In this connection I have to mention that the incidence is on the decrease day by day.

Report to Medical Officer Coondapur

--

Copy of letter R.No.425 dated 6-7-1955 from the Government Hospital, Coondapur to the District Medical Officer, South Kanara, Mangalore.

--

Ref.C.No. 9180-55 dated 2-7-1955 Mangalore- District Medical Officer's office.

--

The seasonal incidence of conjunctivitis that usually occur in the months of January to July every year had been on the increase this year particularly more in the month of April May and June. But as it stands to-day the disease is now well under control or judged from the outpatient attendance during the last 20 days with reference to conjunctivitis cases.

PREDISPOSING FACTORS:-To account for this high indidence there are no unusual causes that could be attributed. A few notes that stand glaring this season in these parts are the scarcity of fish especially in a place like this, which is known for abundance of fish supply at normal rates. But this factor may be over ruled as both vegetarians and mixed are equally affected by this disease. Another factor which usually increase the flies is the jack and mango fruit. But local enquiry show that there had been less of fruit, especially jack, which should have helped in decreasing the number of small flies which usuaully taunt the eye and transmit this disease.

DISTRIBUTION :-All class of people, young and old, male or female rich or poor have been equally affected about 30% of the population would have been affected by this disease this year at one time or other. A sample survey of a slum area of Coondapur (Via)Karvikeri was undertaken by the District Medical Officer, District Health Officer and myself and the report is in your office.

ETIOLOGY:-Majority belonged to Kock's weeks Bacillus a few pnemococcal angular conjuctivitis caused by bacillus of Morax-axonfield, and very few cases of unidentified etiology, probably of virus origin, where slides proved negative for organisims. This particular type is described separately below.

INVESTIGATIONS:-1.Smears of the conjunctival secretians were taken from nine patients including all types of cases and were despatched to the District Medical Officer, South Kanara, Mangalore where report after bacteriological examination may be please be referred to in C.No.6464/55 Mangalore District Medical Officer's office dated 21-5-55(2) In addition scraping from the lids of twenty patients (including all types) have been sent through Dr. George, Nutrition Specialist, Government of Madras for necessary examination Results of which are yet awaited.

SIGNS AND SYMPTONS. As far conjunctivitis -varying with the type. But from one type of suspected virus origin a few salient points are noted below.

(p.t.o)

45

This type is usually seen in children under the age of 5 years. Sudden onset no constitutional symptoms- sweelling of lids marked. Both eyes affected-simultaneously child never opens the eyes for 3-4 days pain plus and erhting the lids one or 2 drops of pus thick and yellowsish falls down- Mucous membrane of lid is inflamed-red. No granules seen, but rarely a few ulcer could be noted -conjective red. Cornea and anterior chamber free. This type responded very well to auriomycin opthalmic ointment only. The usual treatment failed -pencillin local parental had no effect. So auriomycin opthalmic ointment was used with success with 2 days of treatment with barely 2 applications a day. So a therapeutic diagnosis of virius origin may be thought off in this type.

Treatment .All cases were treated as follows:-
1.Wash with normal saline BE twice a day.
2)Silver nitrate drops 1% or Argerol 5% BE twice a day.
3)Eye ointment at night for BE.

In addition to the above general line of treatment Z.B.drops Penicillin eye ointment- spectrocin eye ointment auremmycin opthalmic ointment and Terramycin opthalmic ointment were also usual depending on the eteological factor or severity of the cases.

With the above line of treatment there had been no complication seen during the course of treatment and every case was treated successfully within 3 to 4 days.

COMPLICATION: No complication arose during the course of treatment But 10 cases of ulcer cornea and 1 case of orbital cellulites and one case of [illegible] were treated upto date. Ulcer Cornea cases were treated with atropic drops ointment. Sub conjunctival penicilli aureomycin opthalmic ointment. The [illegible]arbetal cellulites were treated with antibiotics but they lost their vision of particular eye affected. All the cases of ulcer cornea treated well and discharged cured without any loss of vision.

RECURRENCE:-There had been a general complaint that there had been 2 or 3 attack of recurrence of cases clunts in the same person. This is only due to inadequate unproper intermittent treatment for which the patient alone is to be blamed.

STATISTICS: The number of eye cases treated since January 1955 is furnished below. This pertains to new cases only.

| Year Month. | Jan.55. | Feb.55 | March 55. | April 55. | May 55. | June 1955. |
|---|---|---|---|---|---|---|
| | 180 | 218 | 315 | 784 | 1690 | 826 |

In July 1955,so far upto 6th -87 men cases have been treated. From the daily attendance it is seen that from June 15th onwards the number of eye cases has decreased considerably and the daily attendance of new cases of conjunctivitis varies from 10-20 per day. The number of cases of conjunctivitis that are attending at present is as follows:-

| July. 1 | July. 2 | July. 3 | July. 4 | July. 5 | July. 6 |
|---|---|---|---|---|---|
| 19 | 13 | 8 | 11 | 18 | 18 |

CONCLUSIONS:-From the above figures it is evident that the so called epidemic is getting controlled and within a forthnight may completely subside.

--

Copy of letter dated 6-7-1955 from the Medical Officer, Local Fund Dispensary Barkar to the District Medical Officer, South Kanara, Mangalore.

--

Ref: C.No.9180-55 dated 2-7-1955.

--

The prevelance of sore eyes in epidemic form this year is per

perhaps due to the occurrence of singing mosquitoes in abundance owing to the humidity of the atmosphere due to early fall of monsoon showers. It may be also due to in frequent use of D.D.T sprays in these parts owing to the natural low incidence of Malaria cases. It is just possible that mosquitoes from Malarial parts might have migrated to these parts of the country.

Though the disease is prevalent in an acute epidemic from this year it is pertinent to observe that every year fruit bearing season is usually attended with eye disease particularly sore-eyes owing to the incidence of mosquitoes on account of decaying fruits.

The usual treatment adopted is washing eyes with boric lotion 1 dr. in 1 pint or Mag Sulph lotion 2 dr. to 1 pint and instilling Argyrol 10% or Z.B. droops. In the past this treatment was sufficient. This year however reported attacks are constant feature. There have been cases where children were injected more than twice. Perhaps loose/Aureomycin ointment alone is another cause of persistance or recurrence of sor eyes. matters of eye ointment is not condusive to free drainage of infected eye, therefore it is source to adopt the usual treatment of Argyrol or Z.B. drops. After preliminary wash with Boric or Mag Sulph lotion and use ointment at nights as we were using plasma before.

/treatment is cause of this occurence. I believe dependence on

Persistent and severe forms also treated with sulphathiazol tablets intimately or penicillin injection for a show.

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(true copy)

for Director of Medical Services.

IDS 119

H.E.L.A. (H3)

#9

24/9

D.O.No.44129 H3/55-12 dt 13-9-55

Dear Dr Sanghamlal, Adisubramaniam,

Sub: Epidemics — S. Kanara Dist — Contageous eye disease — Final report — called for.

D 35 Cf

Ref: Govt. Memo No. 44129 H3/55-10 dated 16-7-55 and Memo No. 44129 H3/55-1

D 37 Cf

dated 3-8-'55

I am to request you to expedite your final

P.T.O

report in the matter.

To

Lt. Col. Sang Lam Lal, M.B.B.S
F.R.C.S., D.O.M.S (Lond)
D.M.S

Dr. T. S. Adisubramaniam,
D.I.H. (Eng)
D.P.H.

51

From
Dr. T.S.Adisubramaniam,
D.I.H., England,
Director of Public Health,
Madras.

To
The Secretary to Government,
Health, Education and Local
Administration Department,
Fort St. George, Madras.

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R.No.32058/5-H5/55, dated 21-9-55.

113

Sir,

Sub:-Epidemics - South Kanara District - Contagious eye ~~disease~~ disease - Final report.

Ref:-1. Government Endt.No.44129-H3/55-1 of 6-5-55. — p 2 ant

2. My D.O. letter No.32058/1-H5/55 of 11-5-55. — p 15 ant

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I forward herewith a report in duplicate on the investigation of the eye disease prevailing during January - May 1955 in some villages in Coondapur Taluk in South Kanara District, carried out by Dr. P.V.George, Nutrition Health Officer of this department.

ASSISTANT SECRETARY TO GOVERNMENT
28 SEP 1955
HEALTH, EDUCATION & LOCAL ADMN. DEPTT.

G 1368

Yours faithfully,

D Parthasarathy 22/9 1/2

for Director of Public Health,
Madras.

rv.22/9.

So 22/9/55

# REPORT ON THE INVESTIGATION OF EPIDEMIC ACUTE CONJUNCTIVITIS IN COONDAPUR TALUK (SOUTH KANARA DISTRICT) DURING JANUARY-MAY, 195[illegible]

The wide-spread prevalence of some serious eye disease in some villages in Coondapur taluk was reported in the second week of May 1955. Immediate steps were taken to investigate the epidemic and to initiate necessary measures for treatment and control. The report on this investigation is summarised below.

The inspection of the affected areas was undertaken between 29th May and 2nd June along with the local health staff. The enquiry of the epidemiological features, the organisation of an immediate treatment campaign and the education of the public on measures of controlling further spread of the epidemic, formed the main objectives of the investigations and are dealt with serially below.

## EPIDEMIOLOGICAL FEATURES

The epidemic was in full swing during the period of inspection and therefore large numbers of acute, convalescent and ~~removed~~ recovered cases were available for purposes of diagnosis, investigation and treatment, in the different hospitals, dispensarie schools and rural families visited.

## CLINICAL SIGNS AND DIAGNOSIS

The onset of the diseases has been invariably sudden, commencing with a sensation of foreign body in the eye, accompanied by pain in the eyes, lacrimation and photophobia. Within 2-3 hours the eye becomes congested, with secretions, first mucoid and later muco-purulent. Eye lids become swollen with increasing --ocular pain and head-ache. Within 24 hours or sometimes a little ~~longer~~ later, the other eye also gets affected. The acute condition is progressive till about the 3rd day, from when the condition gradually recedes in favourable cases. Many serious cases have continued in the acute condition for 7-10 days, especially in the absence of proper treatment. The total duration in most of the moderate types of cases has been about 10-14 days. No serious types leading to affections of the cornea could be seen during the

enquir,.

The clinical picture as described above is that of the familiar acute catarrhal conjunctivitis. From the epidemic nature of the spread of infection and from the large proportion of serious cases with tendency for relapses and recurrences, it may be concluded that a diagnosis of Koch-Weeks conjunctivitis or "Pink eyes" will be more appropriate for most of the cases seen by me. The bacillary forms seen along with cocci in the smears examined lends additional support for this diagnosis.

THE EPIDEMIC of 1955

The epidemic may be said to have commenced in January and steadily progressed till the end of May. There are few villages in the taluk which have escaped infection. Reliable statistics of cases treated from day to day were available only in the Government hospital at Coondapur though enquiries were also made in the nearby rural dispensaries at Kota and Gangolli.

p. 61 infra

Statement No.1 shows monthwar figures of eye diseases, chiefly conjunctivitis, treated in Coondapur hospital. Upto the end of May, beginning from January, 3,187 cases were treated for conjunctivitis in this hospital. Compared to the number of such cases treated each month from 1950 onwards, as shown in the same statement, the magnitude of the present epidemic can be easily appreciated. Thus there were 1690 cases in May 1955 as against only 41 in May 1954 and an average of only 20 during the corresponding periods of 1950-1953. This statement therefore shows the epidemic nature of conjunctivitis during 1955.

...E AND SEX-WAR INCIDENCE

A house to house enquiry was conducted in Basruru village, about 5 miles from Coondapur, in 53 families to study the age and sex-war incidence of the disease. Statement No.2 shows the distribution of cases, as against the actual age and sex distribution in this random sample group of families. Out of 401 persons of all groups, 264 or nearly 66% had suffered from the infection. No age or sex was exempt, though the incidence was definitely higher, 79% among infants and children under 16

p 63 infra

years as against only 54% among adolescents (16-25 years), and 52% among all adults over 26 years

SPREAD OF THE EPIDEMIC

To estimate the spread of the epidemic in and around Coondapur different schools in Coondapur, Tekkatte, Koteswar and Basruru were visited and the active and recovered cases enumerated and examined. Statement No.3 shows the results of this study separately for boys and girls. It may be seen that in Thekkatte nearly 82% of the school children had the attack. In the other areas the percentage of school children affected varied from 54% to 68%

p 65 infra

In all these schools together 65% of the girls had the attack, against only 58% of the boys.

These school surveys also enabled me to gather the information that many villages around these schools had the infection in epidemic proportions.

RELAPSES AND RECURRENCES

One of the most distressing features of this epidemic was the unusually high rates of relapses or recurrences. A few cases were seen which had even 4 relapses. These relapses in most cases had been at weekly intervals. Statement No.4 — p 67 shows the relapse/recurrence rates among 806 cases out of 1386 schoo children and 264 cases among 401 persons of all ages in 53 families in Basruru village, who were specially interrogated on this point. It may be seen that 32% of the school group of cases and 35% of the family group had one relapse, and 19 and 13% respectively had two or more relapses till the first week of June 1955. These high rates of relapses or recurrences either indicate a special feature of the infection that the attack confers little or no immunity or that the treatment adopted was imperfect or inadequate, or both.

CLIMATIC FACTORS

ute seasonal epidemic conjunctivitis is not uncommon in the west coast of Madras State and even elsewhere in the tropics. A causal relationship with meteorological factors has

56



been established by different workers on the epidemiology of seasonal epidemic conjunctivitis. Guerra (1949) writing on such epidemics in Eritrea and Ethiopia says that the disease is endemic there for 7--8 months of the year becoming more severe during the "Small rains" and very severe and epidemic during the "big rains", when 65% of the children and 10% adults are attacked out of a population of 200,000. Bellacci (1947) commenting on the epidemiology in Libya says that cloud and sunshine play a large part while other factors are of minor importance. The experience in the West Coast of South India, does not appear to have been studied in such detail, possibly for want of continuous records of meteorological factors like rainfall. temperature, humidity etc. Rainfall figures for Coondapur town are available and this town happens to be the focal centre of the present epidemic. An attempt is therefore made to correlate the rainfall of the area to the incidence of endemic and epidemic conjunctivitis as based on hospital statistics. Vide statements 1 and 5 and the appended graph where the relevant data have been plotted side by side

The following important inferences are drawn from this study:

1) The precipitation from the South West Monsoons, June to September has been showing a noticeable increase during recent years. The total rains during the remaining 8 months of the year have also been decreasing, as compared to the 60 year's average for the area.

2) The existence of conjunctivitis in the area is obvious from the graph. Further, in recent years there has been a steady increase in the number of cases occurring during January to May. The 1955 epidemic may therefore be considered only as an exaggerated occurrence of the same.

3) The increased incidence of conjunctivitis cases during

recent years from January to May appears therefore to be correlated to the lower rains during that period and the subsidence of cases from June onwards to the heavier rains during the S.W. monsoons.

THE INSECT VECTOR

It is generally believed that the common eye fly, Siphunculina funicola, is the mechanical or passive vector in the spread of acute seasonal conjunctivitis. This belief is based on the seasonal coincidence of the swarming of the eye flies with that of the increased incidence of conjunctivitis during the summer months. The eye fly season has also been popularly associated with the fruit season. This year has been one of the leanest years for fruits in Coondapoor taluk, especially of mangoes, jack fruits and cashew fruits, yet the epidemic of conjunctivitis had been the worst in living memory. The popular association of fruits-flies-pink eyes' cannot therefore be considered as generally true. Fruits like mangoes are the important sources of the vitamins A, B2 and C in the West Coast and are therefore vitally concerned in maintaining the resistance of the body especially of the eyes, against infections. The emphasis on the nutritional bearing of the association of fruits and "pink eyes" is therefore more reasonable. The association of eye flies and "pink eyes" has to be considered of lesser importance, though they have a definite role in the spread of infection from eye to eye.

TREATMENT

Treatment of cases with Terramycin opthalmic ointment was started on the 30th May in Basrur village and continued on the 31st and 1st June visiting the village both morning and afternoon. In all 253 persons were treated by me in this village. In addition [illegible]ese 16 cases in Kota, 38 in Thekkatte, and 66 in Coondapoor were also treated during the 3 days. Of these 373 persons whom I treated, Terramycin was applied only once in 324 cases, twice in 34 cases, thrice in 15 cases, four times in 1 case and six times in 1 case. It was found

that even one liberal application of Terramycin ointment showed remarkable improvement. Two or more applications were given only to those who did not quickly respond. For continuing the treatment in serious cases, required quantities of Terramycin were left in Basruru village and Coondapur. Reports received two weeks after my return, showed that all cases treated with Terramycin recovered quickly.

EDUCATIVE CAMPAIGN AND EXPERIMENTAL CONTROL MEASURES

Before my arrival the District health staff had already distributed widely in all affected villages a leaflet fully describing the measures to be taken in controlling the spread of infection and the facilities provided for treatment. These educative measures were further emphasised during my visits to the villages. With a view to minimise the nuisance from eye flies, the following experiments were carried out:

1) 5 houses each were sprayed with Pyrethrum extract (0.1%) and DDT (wettable) 5% powder employing a power sprayer. The results as reported later by the Entomological Assistant of the Antimalaria Scheme, Puthur, South Kanara was that there was no noticeable reduction in the nuisance from eye flies in the respective houses.

2) Eye flies generally attach themselves to threads, coir strings, bits of straw or coconut thatch, etc. (particularly those which are dark or brown in colour) which hang from the eaves or ceilings of houses. In a few houses, and the ~~Travelling~~ Traveller's Bungalow at Coondapur some of the hanging pieces were dipped in DDT (5%) suspension to see if this will repel the eye flies and the others were left untreated. The result was observed for 3 days.

The flies completely avoided the treated hanging bits while they swarmed on the others. The Health Inspector, Coondapur and the Entomologist have been advised to carry out further trials with this cheap method and to see if the swarming

of eye flies in houses can be controlled to any extent.

SUMMARY AND CONCLUSIONS

Conjunctivitis has long been occurring in Coondapur taluk though this year from January to June it flared up in unusually severe epidemic proportions, affecting over 66% of the population. The incidence rate was the highest (79%) in children, 54% among adolescents, and 52% among adults over 25 years of age.

2) The gradual increase in the rains during the S.W.monsoon and its decrease during the rest of the year appear to have played an etiological role in the epidemic of this year. Climatic factors have been found to have a causal relationship with the onset of seasonal epidemic conjunctivitis investigated in different countries in North East Africa.

3)Terramycin ophthalmic ointment was employed in the treatment of 373 cases.The results were quick and encouraging in all the cases.

4) Results of experiments in the control of "eye flies"with pyrethrum extract (0.1%) and DDT wettable (5%) suspensions in Coondapur and Basruru have been described.

5),Statements showing age and sex-war incidence of conjunctivitis relapse rates, etc., and one rainfall/cases graph, showing their aetiological relationship have been appended.

--

D. Parthasarathy 2/2
22/9
for Director of Public Health
Madras.

nrr

61

Statement No.1.

Eye diseases chiefly conjunctivitis treated in Coondapur Government Hospital.

| Months | 1950 | 1951 | 1952 | 1953 | 1954 | 1955 |
|---|---|---|---|---|---|---|
| January | 16 | 14 | 11 | 11 | 15 | 180 |
| February | 16 | 19 | 14 | 16 | 12 | 218 |
| March | 14 | 33 | 15 | 14 | 21 | 315 |
| April | 35 | 14 | 19 | 3 | 23 | 784 |
| May | 12 | 25 | 15 | 27 | 41 | 1690 |
| June | 26 | 32 | 4 | 15 | 20 | 526 |
| July | 11 | 23 | 6 | 5 | 38 | 465 |
| August | 6 | 62 | 1 | 15 | 9 | |
| September | 6 | 27 | 23 | 12 | 25 | |
| October | 13 | 22 | 12 | 9 | 31 | |
| November | 11 | 16 | 16 | 10 | 39 | |
| December | 18 | 18 | 20 | 14 | 24 | |
| Total | 184 | 305 | 156 | 151 | 298 | 3187 for 5 months only |

4013 for six months

nrr

Statement No.2.

Epidemic conjunctivitis -- Age and sex-war incidence.
(Basruru village - 53 families)

| Ages and Sexes. | Under 1 | | 1 to 5. | | 6 to 15 | | 16 to 25 | | 26 to 35 | | 36 to 45. | | 46 and above. | | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | |
| Age and sex distribution in 53 families. | 1 | 3 | 33 | 32 | 53 | 79 | 38 | 36 | 17 | 15 | 22 | 23 | 26 | 23 | 401 |
| Distribution of cases in the above 53 families | 1 | 2 | 28 | 30 | 38 | 59 | 20 | 29 | | 11 | 13 | 14 | 13 | 6 | 264 or 65.83% |

nrr.

Statement No.--

Epidemic conjunctivitis -- Age and sex-war incidence.
(Basruru village - 53 families)

| Ages and Sexes. | Under 1 | | 1 to 5. | | 6 to 15 | | 16 to 25 | | 26 to 35 | | 36 to 45. | | 46 and above. | | Total |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | M. | F. | |
| Age and sex distribution in 53 families. | 1 | 3 | 33 | 32 | 53 | 79 | 38 | 36 | 17 | 15 | 22 | 23 | 26 | 23 | 401 |
| Distribution of cases in the above 53 families | 1 | 2 | 28 | 30 | 38 | 59 | 20 | 20 | 9 | 11 | 13 | 14 | 13 | 6 | 264 or 65.83% |

nrr.

Statement No.3.

INCIDENCE OF EPIDEMIC CONJUNCTIVITIS
in Coondapur and around -
January--May 1955.

(Among School Children.)

| PLACES. | BOYS | | | GIRLS | | | Percentage of total children affected. | Remarks. |
|---|---|---|---|---|---|---|---|---|
| | No.on rolls. | No.affected. | % affected. | No.on rolls. | No. affected. | % affected. | | |
| Coondapur | 377 | 183 | 48.54 | 262 | 163 | 62.21 | 54.14 | Board Higher Elementary School & B.R.Rao Elementary School. |
| Tekkatte | 122 | 99 | 81.14 | 66 | 55 | 83.33 | 81.91 | Board Higher Elementary school |
| Koteswar | 147 | 107 | 72.78 | 120 | 74 | 61.66 | 67.79 | Board Higher Elementary School |
| Basruru | 136 | 65 | 47.79 | 96 | 60 | 62.50 | 53.87 | Higher Elementary school |
| Total | 782 | 454 | 58.05 | 544 | 352 | 64.71 | 60.78 | |

Note:- * In 53 families surveyed in Basruru village there were 132 children between 6--15 years, and 97 of these (73.48%) had conjunctivitis.

nrr

Statement No.4.

Epidemic conjunctivitis in Coondapur taluk (South Kanara District)

RELAPSE RATES

| | Only 1 attack. | | Two attacks. | | Three or more attacks. | |
|---|---|---|---|---|---|---|
| | Number | % to total attacks. | Number. | % to total attacks. | Number. | % to total attacks. |
| Relapses rate in 806 cases among 1326 school children examined. | 392 | 48.63 | 261 | 32.38 | 153 | 18.98 |
| Relapses among 264 cases (all ages and sexes) in 53 families in Basruru village. | 140 | 53.03 | 90 | 34.9 | 34 | 12.87 |

nrr

Statement No.5.

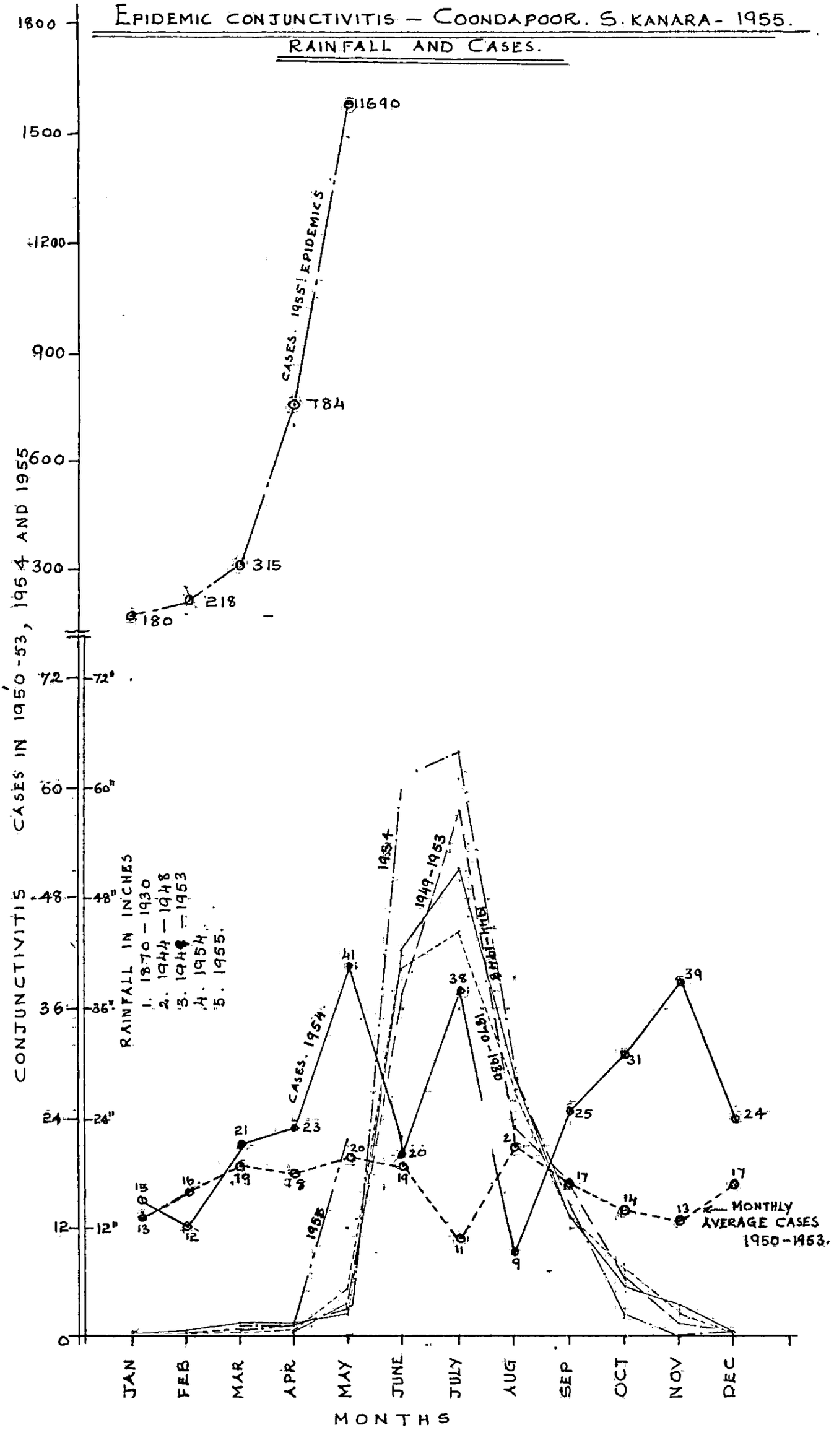
RAINFALL IN COONDAPOOR (SOUTH KANARA)

| PERIOD. | Rainfall during S.W. monsoon in inches. | Rainfall during remaining 8 months. inches. | Average or actual annual rainfall in inches. | Remarks |
|---|---|---|---|---|
| 60 years (1870-1930) | 125.80 | 15.80 | 141.60 | Average |
| 5 years (1944-1948) | 135.36 | 14.13 | 149.49 | Average |
| 5 years (1949-1953) | 136.24 | 11.84 | 148.08 | Average |
| 1954 | 168.69 | 8.96 | 177.65 | Total for the year. |
| 1955 | --- | 22.72 | --- | January May 1955 only. |

nrr

# EPIDEMIC CONJUNCTIVITIS — COONDAPOOR. S. KANARA - 1955.

## RAINFALL AND CASES.



C.No. 44129 H3/55

Epidemics — South Kanara Dist. — Barkur, Coondapoor etc. — Contageous eye disease — Prevalence of.

Reference:-

From Sri Kolkebail, M.L.A. telegrams d/ 4-5-'55 p 1, 3-4 c.f.

" " letter d/ 5-5-'55 p 5 c.f.

G.o.I. Endt. No. 44129 H3/55-1 d/ 6-5-'55 p 2 c.f.

" D.O. letter No. 44129 H3/55-2 d/ 9-5-'55 p 6 c.f.

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Please see the minutes of M.(H) on pages 5 & 9 c.f.

The telegrams from Sri Kolkebail on pp. 3 and 9 c.f. are only copies of the telegram on p.1 c.f., which was communicated to the D.P.H. & the D.M.S. for necessary action and report. Sri Kolkebail's letter on p 5 c.f. has also been communicated to the D.P.H and the D.M.S. with this Dept. D.O. dated 9-5-'55 on p.7 c.f. and they have been asked to take urgent action in the matter and send a report to G.o.I. as early as possible.

~~It is for consideration whether the D.P.H. and the D.M.S. should again be asked to take immediate action with reference to the minutes of M.(H) on p. 9 c.f.~~

[P. T. O.]

~~or whether~~ the reports already called for may be awaited till 25 5-55.

May be circulated to M(H).

11/5/55

11.5.55

11.5.55

M(H)

From President, Granguli Panchayat Tgm dt 11-5-55

Govt. Endt. 44129 H3/55-3 dt/ 13-5-55

From D.M.S. D.O No. 39634-G/55 dt/12-5-55

From D.P.H. D.O. No. 32058-1/55 dt/11-5-55

Please see the Telegram on page 11 cf from President, Granguli Panchayat reporting the spread of eye disease. The Telegram has been communicated to the D.P.H & D.M.S with Govt. Endt. No. 44129 H3/55-3 on page 12 C.F.

The D.M.S and D.P.H have sent interim reports ~~about the situation~~ which are on pages 13 and 15 C.F. The D.M.S reports that the D.M.O, S. Kanara has been asked to take immediate control & preventive measures in consultation with the D.H.O. South Kanara

25/13.5

and that a detailed report in the matter from the D.M.O. will be forwarded to Govt on receipt of the same. The D.P.H reports that Dr. P.V. George, Nutrition Health officer is being deputed to survey and study the prevalence of the eye disease in S.Kanara and that on receipt of the report of the Nutrition Health Officer, preventive measures would be undertaken. The file may be circulated to M(H) for information.

44129/44/56

3/0

13/5/55

13.5.55.

av 13.5.55 JS

P Ghulam M 13.5.55

JOINT SECRETARY TO GOVERNMENT
18 MAY 1955
HEALTH, EDUCATION AND ...

M(H) 16.5

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P 19 cf
P 21 cf
P 23 cf
P 25 cf

From D.M.S. Ref. No. 39634-G/55 d/17-5-55
From Sri Kolkebail M.L.A. D.O d/ 5-5-55 to C.M.
Passed as Memo No. 44129 H3/55-4 d/ 19-5-55
From D.M.S. 39634-G/55 d/ 8/11-6-55

Draft Memos to the D.P.H and the D.M.S are submitted for approval.

14/6/55

av 14.6.55 M(H) may see. S

P Ghulam M 14.6.55

14/6/55

M(H) The leaflet may contain a Kannada translation also. Passed by 14/6

SECRETARIAT
15 JUN 1955
HEALTH, EDN. & LABOUR DEPTT.

~~but~~ Results. With reference to the minutes p/H(H)/ on p3 ante Drgt. if below has been amended in pencil. The Drgt. may issue as amended.

15-6-55 16.6.55 16.6.55

Issued as Govt. Memo No. 44129 H3/55-6 d/16-6-55 — p 29 cf

Issued as Govt Memo No. 44129 H3/55-7 d/16-6-55 p 30 cf

From D.P.H. R.No. 32058/4/H5/55 d/23-6-55. p 31 cf

Please see the letter of the D.P.H on page 31 c.f. The D.P.H has requested the approval of Govt ~~for~~ of his action in having incurred an expenditure of Rs 38-5-3 for the purchase of Terramycin Opthalmic ointment ~~in~~ from the provision of Rs 500/- sanctioned in G.O.Ms 1839 Health dated 28-5-55. He has also requested the permission of Govt for incurring any further expenditure found necessary from this same provision for the purchase of opthalmic ointment for treatment of eye diseases in S. Kanara Dist

p 31 cf

p3 cf of (A)

P. 31 cf

The action of the D.P.H may be approved and ~~for~~ permission ~~may~~ be granted ~~May also be granted to incur~~ ~~any further expenditure upto Rs sanctioned~~

VB

~~further expenditure, if necessary, for the purchase of additional opthalmic ointment from~~ the provision of Rs 500/- made in G.O.Ms.No. 1839(H) 28-5-55

P34 ⑦ (A)

H3

Draft memo is subd. for approval. Finance may see before issue.

28/6/55

30/6/55

Pl. 1-7

In G.O. no 1839 Health Dated 28.5.55, the Govt have sanctioned an expenditure of Rs 500 for the purchase of Terramycin, eye opthalmic ointment. It does not seem necessary that fresh sanction of Govt is necessary for particular items of expenditure within the amount sanctioned. Finance may advise

If fresh sanction is necessary the draft below may be issued

av
1.7.55

Finance

Fin (Exp B)

The sanction accorded in the G.O. at (A) was for the Palakkad St. As the scope of Rs 38-5-3 refused to on f I.C.F. and the proposal to be incurred relates to the South Kanara St., fresh sanction is necessary. The draft memo below may be accepted

2/7/55

2-7-55

HBA

H.E.L.A.U.O.
No: 44129 H3/55-8

ASSISTANT SECRETARY TO GOVERNMENT
4 JUL 1955
6790
HEALTH, EDUCATION & LOCAL ADMIN. DEPT.

ASSISTANT SECRETARY TO GOVERNMENT
5281S
1 JUL 1955
FINANCE DEPARTMENT

Fin No: 32815-EB1/2.7.55

H·E·L·A (H3)

The notes of Fin. Dept overleaf may be perused. Draft memo below may issue.

8/4/7/55

6755

JS 6.7.55

Issued as Memo No. 44129 H3/55-9 d/ 6-7-55 p 33 34 cf

Issued as Memo No. 44129 H3/55 - 10 d/ 16-7-55 - p 35 cf

Issued as Mems No. 44129 H3/55 - 11 d/ 3-8-55 - p 38 cf

From the D.M.S. In P No 204 G/55 d/ 9-8-55 - p 39 cf

From D. M. S. In P. No. 204-G/55 dated 9 8 55 p 41 cf

Draft D.O reminders to the ~~D.M.S and the~~ D.P.H is subd for approval.

28/2/9/55

10985

~~ADS~~ - G

12958

3.9.55

9

Issued as D.O. No. 44129 H3/55 -12 d/ 13-9-55 p 42 cf

From D.P.H. R.No. 32058/5-H5/55 d/ 21-9-55 8 . The final ref.n

p 41 cf

The D.M.S. has furnished a copy of the report of the Medical Officer, Coondapur and Barkur on the epidemic eye disease which prevailed in the South Kanara District during the months from Jan– June 1955 on pages 43 - 47 cf. The D.M.S. has reported that the eye disease is now under control.

pp 43-47 cf.

p 41 cf

The D.P.H. has forwarded the report of Dr. P.V. George, Nutrition Health Officer on his investigation of the epidemic eye disease that prevailed in the South Kanara Dist. Dr. George was specially deputed to survey and study the prevalence of the eye disease in South Kanara Dist. in May last

p 51 cf

pp 53-71 cf

p 15 cf

The self contained report of the Nutrition Health Officer on pp 53-71 cf may be perused.

pp 53-71 cf

The eye disease that prevailed in epidemic form in the Coondapur Taluk of South Kanara Dist. was mainly Koch-Weeks Conjunctivitis The seasonal incidence of conjunctivitis that occurs in the months of January to July every year in the Coondapur Taluk

p 51 cf

↑ or p 43 cf

appeared in an
/aggravated from this year and few
villages in the taluk escaped infection p 54 cf
The epidemic which commenced in
January steadily progressed till
end of May in which month the p 54 cf
maximum number of 1690 cases were
recorded. In June the figure dropped p 61 cf
to 826 cases and the figures for the 'B' on p 45 cf
subsequent months show that the
epidemic had subsided. The
incidence of the disease was high p 54 cf
among infants and children. The
magnitude and epidemic nature
of the disease may well be
understood from the statement on
p 61 cf and the graph on p 71 cf.

One of the distressing
features of this year's epidemic p 55 cf
was said to be the unusually
high rates of relapses. The
Nutrition Health Officer has stated
that this indicated that either
the infection confers little or no immunity
or that the treatment adopted was p 55 cf
imperfect or inadequate, or both

Acute seasonal epidemic
Conjunctivitis is said to be not uncommon ibid
in the West Coast of Madras State. A casual
relationship has been attributed between pp 55 - 56 cf

p 58 cf

epidemiology of seasonal conjunctivitis and meterological factors.

The Nutrition Health Officer has drawn the following inference from the survey and study conducted by him

The increased incidence of Conjunctivitis cases ~~and~~ during recent years, from January to May appears to be correlated to the ~~low~~ lower rainfall during the period and the subsidence of cases from June onwards to the heavier rains during the South West Monsoons. This is borne out by the statements on pp 61 and 69 cf and the graph on p 71 cf. The total rains during the remaining eight months of the year have been decreasing as compared to the 60 year average for the area – vide statement on p 69 cf – and this is correlated with the increasing number of cases of Conjunctivitis during Jan – May. The Nutrition Health Officer considers that this year's epidemic may be considered as an exaggerated occurance of the same.

pp 56 – 57 cf

p 56 cf

The above ~~ex~~ observation made by the N.H.O. seems to provide a good explanation for this year's

epidemic.

The Public Health staff conducted educative campaigns by distributing leaflets describing the measures to be taken to control the spread and of infection and the facilities provided for treatment. Experimental control measures were also adopted to minimise nuisance from eye flies which are the passive vector in the spread of the disease.

The monthly average of number of cases of Conjunctivitis has now dropped to about 15.

~~The file may be circulated to M (H)~~

No further action on the part of the Govt. seems called for. The papers may be recorded after perusal by M (H). Thanks.

Rs 27/9/55

Mr 27.9.55.

AV 28.9.55

FS

Ghulam 29.9.55

LE 29.9.55

M (H) 30/9

SECRETARY TO GOVERNMENT
10 SEP 1955
HEALTH, EDN. & LOCAL ADMN. DEPTS.

The papers may now be recorded.

G.O. Ms. No. 3117 Health dated 4-10-55.

Rs 7/10/55

Mr 7.10.55

AV 3-10-55

Abstract:

Epidemics — South Kanara District — Coondapur taluk — Contageous eye disease from January to June 1955 — Papers recorded.

44/29 - 6/75, 2889

p 58 cf

p 45 cf.